



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Tim Baer, Treasurer
Alabama Republican Party
P.O. Box 361784
Birmingham, AL 35236

MAY 2 2001

Identification Number: C00044776

Reference: 30 Day Post-General Report (10/19/00-11/27/00)

Dear Mr. Baer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) from an organization(s) which is not a political committee registered with the Commission. In order for your committee to accept contributions from unregistered organizations into accounts used to influence federal elections, your committee should take steps to insure that the contributor(s) used permissible funds to make the contribution(s) to avoid violating 2 U.S.C. §§441a(f) and 441b or 11 CFR §102.5(b). Under 11 CFR §102.5(b), organizations which are not political committees under the Act and choose to contribute to federal committees must either: 1) establish a separate account which contains only those funds permitted under the Act, or 2) demonstrate through a reasonable accounting method that the organization has received sufficient funds subject to the limitations and prohibitions in order to make the contribution.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. In addition, please clarify whether the contribution(s) received from the referenced organization(s) is permissible. To the extent that your committee has received impermissible funds, the Commission recommends that you transfer the impermissible funds to an account not used to influence federal elections or refund the impermissible amount(s) to the

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donor(s) in accordance with 11 CFR §103.3(b). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. Should you choose to transfer-out or refund the contribution(s), the Commission will presume the funds were impermissible if no statement from your committee provides information to the contrary. Transfers-out and refunds should be disclosed on a Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of prohibited contributions, prompt action by your committee in transferring-out or refunding the amounts will be taken into consideration.

Schedule A of your report (pertinent portions attached) discloses an apparent contribution(s) from a corporation(s). 2 U.S.C. §441b(a) prohibits the receipt of contributions from corporations unless made from a separate segregated fund established by the corporation.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have received a corporate contribution(s), you must transfer-out the impermissible funds to an account not used to influence federal elections or refund the full amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all transfers-out and refunds should be made within thirty days of the treasurer's receipt of the impermissible funds. In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the

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acceptance of a prohibited contribution, prompt action by your committee to transfer-out or refund the amount will be taken into consideration.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee and its affiliates from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Schedule A of your report discloses a contribution from the "Department of Finance State of Alabama State Comptroller's Office". Please amend your report to clarify the nature and purpose of this receipt.

-The totals listed on Lines 6(c), 7, 11(a)(ii), 11(a)(iii), 11(c), 11(d), 19, 20,

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21(a)(ii), 30, and 31, Column B of the Summary and Detailed Summary Page(s) appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B totals. Please amend your report and any subsequent reports that may be affected by this correction.

-The beginning cash balance of this report should equal the ending balance of your Amended 12 Day Pre-General Report, dated 10/27/00. Please clarify this discrepancy and amend any subsequent report(s) that may be affected by this correction.

-Your calculations for Line 8 appear to be incorrect. Cash-on-hand at the close of the current reporting period should always equal the closing calendar year-to-date cash-on-hand amount. Please provide the corrected total on the Summary Page.

-Commission Regulations require that a committee disclose the identification of all individuals who contribute in excess of \$200 in a calendar year. (11 CFR §104.3(a)(4)(i)) Identification for an individual is defined as the full name, mailing address, occupation and name of employer. (11 CFR §100.12) Your report discloses contributions from individuals for which the identification is not complete.

You must provide the missing information, or if you are unable to do so, you must demonstrate that "best efforts" have been used to obtain the information. To establish "best efforts," you must provide the Commission with a detailed description of your procedures for requesting the information. Establishing "best efforts" is a three-fold process.

First, your original solicitation must include a clear and conspicuous request for the contributor information and must inform the contributor of the requirements of federal law for the reporting of such information. (11 CFR §104.7(b)(1))

Second, if the information is not provided, you must make one follow-up, stand alone effort to obtain this information, regardless of whether the contribution(s) was solicited or not. This effort must occur no later than 30 days after receipt of the contribution and may be in the form of a written request or an oral request documented in writing. (11 CFR § 104.7(b)(2))
The request must:

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- clearly ask for the missing information, without soliciting a contribution;
- inform the contributor of the requirements of federal law for the reporting of such information, and
- if the request is written, include a pre-addressed post card or return envelope.

Third, if you receive contributor information after the contribution(s) has been reported, you shall either a) file with your next regularly scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before your next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.7(b)(4))

Please provide the missing information or a detailed description of your procedures for requesting the information. For more information on demonstrating "best efforts," please refer to the Campaign Guide.

-Please clarify all expenditures made for "TV-AD" on Schedule(s) B. If a portion or all of these expenditures were made on behalf of specifically identified federal candidates, this amount should be disclosed on Schedules B, E or F supporting Lines 23, 24 or 25 and include the amount, name, address and office sought by each candidate. 11 CFR §§104.3(b) and 106.1

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule(s) H4 of your report to clarify the following description(s): "Consulting". For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-Please amend your report by providing the address for each disbursement itemized on Schedule H4 supporting Line 21(a).

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to check the appropriate CATEGORY box for the payment(s) made to multiple vendors. Please amend your report to disclose the appropriate category.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include the total EVENT YEAR-TO-DATE amount for a payment(s) to multiple vendors. Please amend your report to include the missing EVENT YEAR-TO-DATE total(s).

ALABAMA REPUBLICAN PARTY

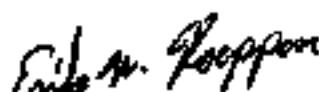
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-On Schedule H2, you disclose the ratio for "GOTV" to be 'new'; however, Schedule H2 of your October Quarterly and 12 Day Pre-General Reports disclosed a ratio for this activity/event which is identical to the one given in this report. Please amend your report to clarify this discrepancy. 11 CFR §104.10(a)(1)

-Schedule A supporting Line 17 of your report discloses a \$4,214.92 receipt from Strategic Telecommunications for what appears to be a returned check for an allocable expense disclosed on the 1999 Year End Report (pertinent portion attached). Please be advised that a voided check for an allocable expense should be disclosed as a negative entry on Schedule H4. Furthermore, you have failed to provide any information regarding a transfer-out of the non-federal portion for the voided check pertaining to this allocable expense. Please provide this clarifying information and, in addition, please clarify if and when this check was reissued. If it was not reissued, please clarify the steps your committee has taken to account for the federal portion of this voided check.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Erik W. Koeppen
Reports Analyst
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
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Any information copied from such Reports and Statements may not be sold or given by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Calhoun Co Rep. Comm P.O. Box 2271 Anniston, AL 36202- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/23/2000	320.00
	Aggregate Year-to-Date ->	320.00	
B. Full Name, Mailing Address and Zip Code Callahan for Congress Committee Congressmen Sonny Callahan 4328 Boulevard Park South Mobile, AL 36609- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	United States	11/02/2000	5,000.00
	Occupation	U. S. Congressman	
C. Full Name, Mailing Address and Zip Code Chilton County Republican Party 1055 County Road 159 Clanton, AL 35045- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/23/2000	3,515.00
	Occupation		
D. Full Name, Mailing Address and Zip Code Clarke County Republican Party 117 Wilson Ave Thomasville, AL 36784- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/27/2000	160.00
	Occupation		
E. Full Name, Mailing Address and Zip Code Clarke County Republican Party 117 Wilson Ave Thomasville, AL 36784- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	408.50	
	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/30/2000	16.00
F. Full Name, Mailing Address and Zip Code DeKalb County GOP 781 Andrew Lake Road Deninger, AL 35978- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/23/2000	140.00
G. Full Name, Mailing Address and Zip Code Franklin County GOP 464 Hyde Road Phil Campbell, AL 35581- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/31/2000	552.00
Aggregate Year-to-Date ->	Aggregate Year-to-Date ->	552.00	

SUBTOTAL of Receipts This Page (optional)

\$9,703.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules I
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11(c)

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Callahan for Congress Committee Congressman Sonny Callahan 4328 Boulevard Park South Mobile, AL 36609-	Name of Employer United States	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 2,500.00
	Occupation U. S. Congressman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	3,500.00	
B. Full Name, Mailing Address and Zip Code Federal Express PAC Mr. Doug Buttrey 1900 Nanchek Blvd. Kemphis, TN 38132-	Name of Employer	Date (month, day, year) 10/11/2000	Amount of Each Receipt this Period 5,000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	5,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)

\$7,500.00

TOTAL This Period (last page this line number only)

\$7,500.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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11 (c)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Bachus Relection Hon. Spencer Bachus P.O. Box 59444 Birmingham, AL 35255-9444 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/19/2000	2,000.00
B. Full Name, Mailing Address and Zip Code Callahan for Congress Committee Congressman Bonny Callahan 4328 Boulevard Park South Mobile, AL 36609- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	United States	05/30/2000	1,000.00
C. Full Name, Mailing Address and Zip Code Terry Everett For Congress Hon. Terry Everett P.O. Box 1828 Enterprise, AL 36331- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	U. S. Congressman	
	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code Terry Everett For Congress Hon. Terry Everett P.O. Box 1828 Enterprise, AL 36331- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	United States	05/30/2000	1,000.00
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Congressman	
	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
H. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
I. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

5,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Use APPENDIX schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11(a)(i)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

E. Full Name, Mailing Address and Zip Code Advertising Callahan & Callahan 6671 Merlin Drive Mobile, AL 36619-		Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation	11/14/2000	1,009.94
		Aggregate Year-to-Date ->	1,009.94	
F. Full Name, Mailing Address and Zip Code N. G. Cannanck 270 Pardue Dr. Selma, AL 36701-		Name of Employer None	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Retired	10/24/2000	60.00
		Aggregate Year-to-Date ->	260.00	
G. Full Name, Mailing Address and Zip Code J.W. Camp 9032 Sugar Tree Trail SE Huntsville, AL 35802-		Name of Employer Eagle Spt Svcs Corp	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation President	11/08/2000	50.00
		Aggregate Year-to-Date ->	250.00	
H. Full Name, Mailing Address and Zip Code E. Roy Childers 9512 Hwy. 162 Catherine, AL 36728-		Name of Employer Central Bank of the South	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Security Engineer	10/30/2000	100.00
		Aggregate Year-to-Date ->	540.00	
I. Full Name, Mailing Address and Zip Code W.E. Cobb P.O. Box 3127 Jasper, AL 35502-		Name of Employer None	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Retired	11/03/2000	50.00
		Aggregate Year-to-Date ->	375.00	
J. Full Name, Mailing Address and Zip Code John Patrick Cook 112 Covay Chase Tuscaloosa, AL 35406-		Name of Employer Best Efforts	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Best Efforts	11/06/2000	10.00
		Aggregate Year-to-Date ->	360.00	
K. Full Name, Mailing Address and Zip Code J. Danny Cooper 3438 Manchester Dr. Montgomery, AL 36111-		Name of Employer Master Image, Inc.	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Investment Broker	10/30/2000	100.00
		Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)

\$1,379.94

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary page

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FOR LINE NUMBER
11(a)(i)

Any information copied from such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Edith M. Newsome 935 Main St. S. Sylvania, AL 35988-	Name of Employer Self-Employed Occupation None	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 220.00		
B. Full Name, Mailing Address and Zip Code G. William Noble P.O. Box 430 Gardendale, AL 35071-	Name of Employer Jefferson County Occupation Circuit Judge	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,675.53		
C. Full Name, Mailing Address and Zip Code Doris M. Oliveira P.O. Box 837 Auburn, AL 36831-	Name of Employer Internal Med. Assoc. of Dothan Occupation VP Pulp & Paper	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 430.00		
D. Full Name, Mailing Address and Zip Code Tom P. OJlinger Box 7597 Mobile, AL 36607-	Name of Employer Information Requested Occupation	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 5,120.00		
E. Full Name, Mailing Address and Zip Code James K. Owens P.O. Box 27 Gordo, AL 35466-	Name of Employer Flowers Hospital Occupation Doctor	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 21.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 331.00		
F. Full Name, Mailing Address and Zip Code Mrs. Henry A. Parker 1256 Highland Pkwy. Morris, AL 35116-	Name of Employer None Occupation Homemaker	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 350.00		
G. Full Name, Mailing Address and Zip Code Charles M. Parsons 2823 Bridgewater Drive Phenix City, AL 36867-	Name of Employer Total System Services Occupation	Date (month, day, year) 11/02/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 105.00		

SUBTOTAL of Receipts This Page (optional)

\$5,411.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

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11(a)(i)

Any information copied from such Reports and statements may not be sold or used by any person for the purpose of soliciting contributions or
for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Earl M. McDonald 1755 Parkway Drive Mobile, AL 36605- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/26/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and Zip Code Earl M. McDonald 14051 County Road 26 Mobile, AL 36640-0278 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/26/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and Zip Code Paula McKinney P.O. Box 2088 Florence, AL 35630- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/26/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and Zip Code C. Douglas McLellan 163 Jennifer Dr. Scottsboro, AL 35769- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 10/20/2000 650.00	Amount of Each Receipt this Period 120.00
E. Full Name, Mailing Address and Zip Code Charles A. Miller P.O. Box 490686 Linden, AL 36749- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pine Grove Water Sys Occupation Podiatrist Aggregate Year-to-Date ->	Date (month, day, year) 10/30/2000 780.00	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Stephen M. Minikes Mr. Stephen M. Minikes 701 Pennsylvania Avenue, N. W. Washington, DC 20042-608 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Thulen, Reid & Priest, LLP Occupation Attorney Aggregate Year-to-Date ->	Date (month, day, year) 11/14/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Morris Morris P.O. Box 741 Clanton, AL 35045- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer SE Occupation Florist Aggregate Year-to-Date ->	Date (month, day, year) 10/24/2000 280.00	Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional)	\$16,340.00
TOTAL This Period (last page this line number only)	

SCHEDULE A**ITEMIZED RECEIPTS**

*Name separate schedule
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for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.*

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code H. Craig Philpot 5334 Old Leeds Rd. Birmingham, AL 35210- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period 120.00
	Aggregate Year-to-Date ->	240.00	
B. Full Name, Mailing Address and Zip Code Sam Pierce 1167 Jenkins Dr. Auburn, AL 36830-2536 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lee County Occupation Commissioner	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 812.00
	Aggregate Year-to-Date ->	932.00	
C. Full Name, Mailing Address and Zip Code Emily Pittman 7135 Bay Road Mobile, AL 36605- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date ->	5,000.00	
D. Full Name, Mailing Address and Zip Code Joe S. Pittman 108 Windwood Lane Enterprise, AL 36330- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Attorney	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date ->	5,000.00	
E. Full Name, Mailing Address and Zip Code Mary Pittman P.O. Box 310423 Enterprise, AL 36331- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date ->	5,000.00	
F. Full Name, Mailing Address and Zip Code William B. Pittman 3100 Brookwood Road Birmingham, AL 35223- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date ->	5,000.00	
G. Full Name, Mailing Address and Zip Code William Breden Pittman 3100 Brookwood Road Birmingham, AL 35223- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date ->	5,000.00	

SUBTOTAL of Receipts This Page (optional)

\$25,932.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
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NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code Patricia B. Garyotis 131 Amberwood Dr. Tuscaloosa, AL 35405-	Name of Employer None Occupation Retired Aggregate Year-to-Date -> 900.00	Date (month, day, year) 10/23/2000 Amount of Each Receipt this Period 114.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
B. Full Name, Mailing Address and Zip Code Edward D. Gillespie 4431 Bell Rd. Montgomery, AL 36116-	Name of Employer None Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 11/01/2000 Amount of Each Receipt this Period 100.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and Zip Code John J. Gleysteen 2633 Heathmoor Rd. Birmingham, AL 35223-	Name of Employer UAB Occupation Physician Aggregate Year-to-Date -> 350.00	Date (month, day, year) 10/19/2000 Amount of Each Receipt this Period 50.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and Zip Code W. M. Godwin 1306 Camilla Ave. Ozark, AL 36360-	Name of Employer None Occupation Retired Aggregate Year-to-Date -> 470.00	Date (month, day, year) 10/23/2000 Amount of Each Receipt this Period 120.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and Zip Code Carol F. Gordy 610 Belleville Ave. Brewton, AL 36426-	Name of Employer Natural Decorations Occupation CEO Aggregate Year-to-Date -> 5,120.00	Date (month, day, year) 11/13/2000 Amount of Each Receipt this Period 120.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and Zip Code Jeanette A. Greene 123 N. Autumnwood Dr. Saraland, AL 36571-	Name of Employer None Occupation Retired Aggregate Year-to-Date -> 975.00	Date (month, day, year) 11/03/2000 Amount of Each Receipt this Period 120.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and Zip Code John J. Grimes 23760 Perdido Beach Blvd. Orange Beach, AL 36561-	Name of Employer None Occupation Retired Aggregate Year-to-Date -> 300.00	Date (month, day, year) 11/06/2000 Amount of Each Receipt this Period 10.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)

\$634.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

Use separate schedules
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NAME OF COMMITTEE (In Full)

Alabama Republican Party

A. Full Name, Mailing Address and Zip Code William Paul Glass 2700 Hwy. 280 Suite 6 Birmingham, AL 35223- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Best Efforts	Date (month, day, year) 07/26/2000	Amount of Each Receipt this Period 100.00
	Occupation Best Efforts		
	Aggregate Year-to-Date ->	250.00	
B. Full Name, Mailing Address and Zip Code W. M. Godwin 1306 Camilla Ave. Ozark, AL 36360- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None	Date (month, day, year) 07/05/2000	Amount of Each Receipt this Period 50.00
	Occupation Retired		
	Aggregate Year-to-Date ->	150.00	
C. Full Name, Mailing Address and Zip Code W. M. Godwin 1306 Camilla Ave. Ozark, AL 36360- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None	Date (month, day, year) 09/13/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired		
	Aggregate Year-to-Date ->	250.00	
D. Full Name, Mailing Address and Zip Code Carol F. Gordy 610 Belleville Ave. Brewton, AL 36426- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Natural Decorations	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period -1,000.00
	Occupation CEO		Reattribution Requested
	Aggregate Year-to-Date ->		MEMO
E. Full Name, Mailing Address and Zip Code Carol F. Gordy 610 Belleville Ave. Brewton, AL 36426- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Natural Decorations	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 5,000.00
	Occupation CEO		
	Aggregate Year-to-Date ->	5,000.00	
F. Full Name, Mailing Address and Zip Code Jeanette A. Greene 123 N. Autumnwood Dr. Saraland, AL 36571- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None	Date (month, day, year) 09/05/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired		
	Aggregate Year-to-Date ->	855.00	
G. Full Name, Mailing Address and Zip Code John J. Grimes 23760 Perdido Beach Blvd. Orange Beach, AL 36561- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer None	Date (month, day, year) 07/04/2000	Amount of Each Receipt this Period 10.00
	Occupation Retired		
	Aggregate Year-to-Date ->	210.00	

SUBTOTAL of Receipts This Page (optional)

55,360.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate attachment(s) for each category of the detailed summary page.

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Any information copied from such Schedule and Statement may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to collect contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Spencer P.O. Box 487 Madison, AL 35758-	None	10/24/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	500.00
B. Full Name, Mailing Address and Zip Code William M. Spencer 3300 Cahaba Rd #105 Birmingham, AL 35223-	None	10/19/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	300.00
C. Full Name, Mailing Address and Zip Code Department of Finance State of Alabama State Comptroller's Office 100 N Union St Montgomery, AL 36130-2602	None State of Alabama	10/20/2000	5,727.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Dept of Transportation	Aggregate Year-to-Date ->	5,727.00
D. Full Name, Mailing Address and Zip Code Stephen R. Still 17617 Old Brady Rd. Bay Minette, AL 36507-	None Houston County	11/06/2000	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Real Estate	Aggregate Year-to-Date ->	220.00
E. Full Name, Mailing Address and Zip Code James R. Stillwell 122 Cypress Bend Pl Florence, AL 35639-	None SE	11/06/2000	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Plastic Surgeon	Aggregate Year-to-Date ->	225.00
F. Full Name, Mailing Address and Zip Code W.B. Simpson P.O. Box 1663 Mobile, AL 36633-	None Gulf Lumber	11/01/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Sr. VP	Aggregate Year-to-Date ->	350.00
G. Full Name, Mailing Address and Zip Code Jean S. Sullivan 311 Cresthaven Ct. Selma, AL 36701-	None Self-Employed	11/06/2000	15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner	Aggregate Year-to-Date ->	545.00

SUBTOTAL of Receipts This Page (optional)	\$6,412.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Supplements may not be sold or used by any person for the purpose of soliciting contributions or for charitable purposes, neither than under the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alabama Republican Party

A. Full Name, Mailing Address and Zip Code James E. Barton 3824 St. Andrews Drive Mobile, AL 36693-		Name of Employer QUALIFYING FEE	Date (month, day, year) 11/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation		
		Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code Robert Ernest 2320 North Dogriver Drive Mobile, AL 36605-		Name of Employer QUALIFYING FEE	Date (month, day, year) 11/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation		
		Aggregate Year-to-Date ->	500.00	
C. Full Name, Mailing Address and Zip Code Strategic Telecommunications 2402 University Avenue W St. Paul, MN 55114		Name of Employer PREVIOUSLY REPORTED Y/E '99	Date (month, day, year) 11/27/2000	Amount of Each Receipt this Period 4,214.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation		
		Aggregate Year-to-Date ->	4,214.92	
D. Full Name, Mailing Address and Zip Code James A. Wood 352 Tanglewood Cane Guntersville, AL 35976-		Name of Employer QUALIFYING FEE	Date (month, day, year) 11/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation		
		Aggregate Year-to-Date ->	500.00	

Subtotal of Receipts This Page (optional)

\$5,714.92

MONTH: This Period [last page this line number only]

\$5,714.92

